

**CITY OF HARRISBURG AND HARRISBURG SCHOOL DISTRICT  
MERCANTILE – BUSINESS PRIVILEGE TAX**

**YOUR TAXING CATEGORY IS PRINTED ON THE TAX RETURNS.**

**NOTE: YOUR CANCELLED CHECK IS YOUR RECEIPT. IF A VALIDATED TREASURER'S RECEIPT IS REQUIRED SEND A SELF-ADDRESSED, STAMPED ENVELOPE**

**TAX TYPE** – The proper category for reporting your gross receipts is indicated on the reverse side of this form.

- A) **WHOLESALE** – Shall mean any person who sells to dealers in, or vendors of, goods, wares and merchandise, and to no other individual.
- B) **RETAIL** – Shall mean the sale of merchandise directly to the consumer or end user.
- C) **BUSINESS PRIVILEGE** – Any profession, vocation or commercial activity for which a fee is collected, inclusive of receipts generated from rentals, storage, videos, repairs, construction, etc.
- D) **COMBINED** – Your tax type may be any combination of the above. Report your gross receipts under the indicated categories on this form.

**BUSINESS** – This is defined as carrying on or exercising for gain or profit, in the City of Harrisburg, any trade, profession, vocation, or commercial activity, or making sales in the City of Harrisburg; a profession or vocation or any rendering of personal services in the City of Harrisburg, in any capacity, except as an employee of another

As to those taxpayers having their principal place of business within the City of Harrisburg, business shall include all activities carried on within the City of Harrisburg, as well as, those carried on outside the City of Harrisburg.

As to those taxpayers having their principal place of business outside the City of Harrisburg, business shall include all activities carried on within the City during the tax year.

A person who engages in a taxable activity in the City is subject to this tax whether or not he/she has a permanent place of business within the City of Harrisburg.

We mail Tax Forms to all identified Taxpayers at their last known address. The requirement to pay the Tax, and pay it timely, does not hinge on whether a Taxpayer **received** the Tax Form. Therefore, if you do not receive a Tax Return in January, please call the Tax & Enforcement Office at (717) 255-6513 and we will investigate the problem and correct it.

**EXEMPTIONS**

- 1) Persons employed for a wage or salary, non-profit corporation or associations, organizations for religious, charitable, or educational purposes, agencies of the United States or the Commonwealth of Pennsylvania, and the business of any political subdivision.
- 2) Utilities whose rates are regulated by the Pennsylvania Public Utility Commission.
- 3) Landlords and Rental Property – NO tax shall be assessed on the gross receipts received as rent for a residential property by a landlord or his agent.
- 4) Production or manufacturing operations.

**PHONE INQUIRIES:** (717) 255-6513  
**FAX:** (717) 255-6509

**PENALTY AMOUNT IS 10% OF TAX DUE AFTER THE DUE DATE.**

**THE U.S. POSTAL SERVICE POSTMARK IS THE ONLY PROOF OF TIMELY FILING ACCEPTED.**

**CITY OF HARRISBURG & HARRISBURG SCHOOL DISTRICT  
QUARTERLY BUSINESS PRIVILEGE AND MERCANTILE  
WORKSHEET FOR YEAR 20\_\_**

**SECTION A:**

**CITY OF HARRISBURG BUSINESS PRIVILEGE/MERCANTILE TAX**

<u>ITEM</u>	<u>WHOLESALE</u>	<u>RETAIL</u>	<u>BUSINESS PRIVILEGE</u>	<u>TOTAL AMOUNT</u>	
1. Indicate estimated or actual gross receipts for the year.	\$ _____	\$ _____	\$ _____	\$ _____	5. Quarterly Payment due from line 4 \$ _____
2. Multiply total gross by the tax rate for your category.	.0005 up to \$5,000,000 in excess of \$5,000,000 rate is .000125	.00075 up to \$3,300,000 in excess of \$3,300,000 rate is .000125	.0020 up to \$3,300,000 in excess of 3,300,000 rate is .0005		6. Penalty of 10% if paid after due date \$ _____
3. Total annual estimated tax due for the year.	\$ _____	\$ _____	\$ _____	\$ _____	7. Interest of _____% per month if paid after due date \$ _____
4. For quarterly tax due, divide the total amount of item 3 by "4"					8. Total amount due this quarter/City of Harrisburg. (add lines 5, 6 & 7) \$ _____
Total amount \$ _____ /4=\$ _____ Quarterly Tax Due					9. Note: Use this are for Quarterly adjustments & final 4 <sup>th</sup> Quarter adjustments \$ (-) _____ \$ (+) _____
<b>If Filing An Estimated Return Use Figures From Line 4 For 2<sup>nd</sup>, 3<sup>rd</sup> &amp; 4<sup>th</sup> Quarter Filings</b>					
Total amount due Each Quarter/City of Harrisburg	1 <sup>st</sup> Quarter Due July 30 <sup>th</sup>	2 <sup>nd</sup> Quarter Due Oct 30 <sup>th</sup>	3 <sup>rd</sup> Quarter Due Jan 30 <sup>th</sup>	4 <sup>th</sup> Quarter Due April 30 <sup>th</sup>	10. Total amount due this Quarter (Add lines 8 & 9) \$ _____

**SECTION B:**

**SCHOOL DISTRICT OF HARRISBURG BUSINESS PRIVILEGE/MERCANTILE TAX**

<u>ITEM</u>	<u>WHOLESALE</u>	<u>RETAIL</u>	<u>BUSINESS PRIVILEGE</u>	<u>TOTAL AMOUNT</u>	
11. Indicate estimated or actual gross receipts for the Year	\$ _____	\$ _____	\$ _____	\$ _____	15. Quarterly Payment due from line 14 \$ _____
12. Multiply total gross by the tax rate for your category	.0005 up to \$5,000,000 in excess of \$5,000,000 rate is .000125	.00075 up to \$3,300,000 in excess of \$3,300,000 rate is .000125	.0010 up to \$3,300,000 in excess of 3,300,000 rate is .0005		16. Penalty of 10% if paid after due date \$ _____
13. Total annual estimated tax due for the Year	\$ _____	\$ _____	\$ _____	\$ _____	17. Interest of _____% per month if paid after due date \$ _____
14. For quarterly tax due, divide the amount of item 13 by "4"					18. Total amount due this quarter/City of Harrisburg (Add lines 15, 16 & 17) \$ _____
Total amount \$ _____ /4=\$ _____ Quarterly Tax Due					19. Note: Use this area for Quarterly adjustments & final 4 <sup>th</sup> Quarter adjustments \$ _____
<b>If Filing An Estimated Return Use Figures From Line 4 For 2<sup>nd</sup>, 3<sup>rd</sup> &amp; 4<sup>th</sup> Quarter Filings</b>					
Total amount due Each Quarter/Hbg. School District	1 <sup>st</sup> Quarter Due July 30 <sup>th</sup>	2 <sup>nd</sup> Quarter Due Oct 30 <sup>th</sup>	3 <sup>rd</sup> Quarter Due Jan 30 <sup>th</sup>	4 <sup>th</sup> Quarter Due April 30 <sup>th</sup>	20. Total amount due this Quarter (Add lines 18 & 19) \$ _____

If adjustments are necessary to your payment enter here and explain below.  
Reconcile estimated to actual. Adjustments:  
\$ \_\_\_\_\_

Wholesale \_\_\_\_\_

Retail \_\_\_\_\_

Bus. Privilege \_\_\_\_\_

Submit final breakdown of receipts when complete.

**Grand Total...Amount Due With This Return**  
**Make Check Payable To: "City Treasurer" (Add Lines 10 & 20)**

I declare under the penalties of perjury that this return has been examined by me and to the best of my knowledge and belief is a true, correct and complete return.

Signature of Taxpayer \_\_\_\_\_

Title (Owner, Partner, Etc.) \_\_\_\_\_

Date \_\_\_\_\_

Signature of preparer if other than Taxpayer \_\_\_\_\_

**PLEASE ATTACH A COPY OF YOUR FEDERAL SCHEDULE C, 1065 OR 1120 FORM FOR THE YEAR**

WORKSHEET

**CITY OF HARRISBURG & HARRISBURG SCHOOL DISTRICT  
QUARTERLY BUSINESS PRIVILEGE AND MERCANTILE  
1<sup>st</sup> QUARTER FOR YEAR \_\_\_\_\_**

ACCOUNT #: \_\_\_\_\_

FEDERAL ID #: \_\_\_\_\_

TAXING CATEGORY: \_\_\_\_\_

MAIL TO: City of Harrisburg  
10 N. 2<sup>nd</sup> Street, Suite 305-A  
Harrisburg, PA 17101-1680

Phone: (717) 255-6513

Fax: (717) 255-6509

**SECTION A:**

**CITY OF HARRISBURG BUSINESS PRIVILEGE/MERCANTILE TAX**

<u>ITEM</u>	<u>WHOLESALE</u>	<u>RETAIL</u>	<u>BUSINESS PRIVILEGE</u>	<u>TOTAL AMOUNT</u>	
1. Indicate estimated or actual gross receipts for the year.	\$ _____	\$ _____	\$ _____	\$ _____	5. Quarterly Payment due from line 4 \$ _____
2. Multiply total gross by the tax rate for your category.	.0005 up to \$5,000,000 in excess of \$5,000,000 rate is .000125	.00075 up to \$3,300,000 in excess of \$3,300,000 rate is .000125	.0020 up to \$3,300,000 in excess of 3,300,000 rate is .0005		6. Penalty of 10% if paid after due date \$ _____
3. Total annual estimated tax due for the year.	\$ _____	\$ _____	\$ _____	\$ _____	7. Interest of _____% per month if paid after due date \$ _____
4. For quarterly tax due, divide the total amount of item 3 by "4"  Total amount \$ _____ /4=\$ _____ Quarterly Tax Due  <b>If Filing An Estimated Return Use Figures From Line 4 For 2<sup>nd</sup>, 3<sup>rd</sup> &amp; 4<sup>th</sup> Quarter Filings</b>					8. Total amount due this quarter/City of Harrisburg. (add lines 5, 6 & 7) \$ _____
					9. Note: Use this are for Quarterly adjustments & final 4 <sup>th</sup> Quarter adjustments \$ (-) \$ (+) _____
					10. Total amount due this Quarter (Add lines 8 & 9) \$ _____

**SECTION B:**

**SCHOOL DISTRICT OF HARRISBURG BUSINESS PRIVILEGE/MERCANTILE TAX**

<u>ITEM</u>	<u>WHOLESALE</u>	<u>RETAIL</u>	<u>BUSINESS PRIVILEGE</u>	<u>TOTAL AMOUNT</u>	
11. Indicate estimated or actual gross receipts for the Year	\$ _____	\$ _____	\$ _____	\$ _____	15. Quarterly Payment due from line 14 \$ _____
12. Multiply total gross by the tax rate for your category	.0005 up to \$5,000,000 in excess of \$5,000,000 rate is .000125	.00075 up to \$3,300,000 in excess of \$3,300,000 rate is .000125	.0010 up to \$3,300,000 in excess of 3,300,000 rate is .0005		16. Penalty of 10% if paid after due date \$ _____
13. Total annual estimated tax due for the Year	\$ _____	\$ _____	\$ _____	\$ _____	17. Interest of _____% per month if paid after due date \$ _____
14. For quarterly tax due, divide the amount of item 13 by "4"  Total amount \$ _____ /4=\$ _____ Quarterly Tax Due  <b>If Filing An Estimated Return Use Figures From Line 4 For 2<sup>nd</sup>, 3<sup>rd</sup> &amp; 4<sup>th</sup> Quarter Filings</b>					18. Total amount due this quarter/City of Harrisburg (Add lines 15, 16 & 17) \$ _____
					19. Note: Use this area for Quarterly adjustments & final 4 <sup>th</sup> Quarter adjustments \$ _____
					20. Total amount due this Quarter (Add lines 18 & 19) \$ _____

If adjustments are necessary to your payment enter here and explain below.  
Reconcile estimated to actual. Adjustments:  
\$ \_\_\_\_\_

Wholesale \_\_\_\_\_

Retail \_\_\_\_\_

Bus. Privilege \_\_\_\_\_

Submit final breakdown of receipts when complete.

**Grand Total...Amount Due With This Return  
Make Check Payable To: "City Treasurer" (Add Lines 10 & 20)**

I declare under the penalties of perjury that this return has been examined by me and to the best of my knowledge and belief is a true, correct and complete return.

Signature of Taxpayer

Title (Owner, Partner, Etc.)

Date

Signature of preparer if other than Taxpayer

1<sup>st</sup> Quarter Payment / Remit Prior to April 30<sup>th</sup>

PLEASE ATTACH A COPY OF YOUR FEDERAL SCHEDULE C, 1065 OR 1120 FOR M FOR THE YEAR

**CITY OF HARRISBURG & HARRISBURG SCHOOL DISTRICT  
QUARTERLY BUSINESS PRIVILEGE AND MERCANTILE  
2<sup>nd</sup> QUARTER FOR YEAR \_\_\_\_\_**

ACCOUNT #: \_\_\_\_\_

FEDERAL ID #: \_\_\_\_\_

TAXING CATEGORY: \_\_\_\_\_

MAIL TO: City of Harrisburg  
10 N. 2<sup>nd</sup> Street, Suite 305-A  
Harrisburg, PA 17101-1680

Phone: (717) 255-6513

Fax: (717) 255-6509

**SECTION A:**

**CITY OF HARRISBURG BUSINESS PRIVILEGE/MERCANTILE TAX**

ITEM	WHOLESALE	RETAIL	BUSINESS PRIVILEGE	TOTAL AMOUNT	
5. Indicate estimated or actual gross receipts for the year.	\$ _____	\$ _____	\$ _____	\$ _____	7. Quarterly Payment due from line 4 \$ _____
6. Multiply total gross by the tax rate for your category.	.0005 up to \$5,000,000 in excess of \$5,000,000 rate is .000125	.00075 up to \$3,300,000 in excess of \$3,300,000 rate is .000125	.0020 up to \$3,300,000 in excess of 3,300,000 rate is .0005		8. Penalty of 10% if paid after due date \$ _____
7. Total annual estimated tax due for the year.	\$ _____	\$ _____	\$ _____	\$ _____	7. Interest of _____% per month if paid after due date \$ _____
8. For quarterly tax due, divide the total amount of item 3 by "4"					8. Total amount due this quarter/City of Harrisburg. (add lines 5, 6 & 7) \$ _____
Total amount \$ _____ /4=\$ _____ Quarterly Tax Due					11. Note: Use this are for Quarterly adjustments & final 4th Quarter adjustments \$ (-) _____ \$ (+) _____
If Filing An Estimated Return Use Figures From Line 4 For 2 <sup>nd</sup> , 3 <sup>rd</sup> & 4 <sup>th</sup> Quarter Filings					12. Total amount due this Quarter (Add lines 8 & 9) \$ _____

**SECTION B:**

**SCHOOL DISTRICT OF HARRISBURG BUSINESS PRIVILEGE/MERCANTILE TAX**

ITEM	WHOLESALE	RETAIL	BUSINESS PRIVILEGE	TOTAL AMOUNT	
14. Indicate estimated or actual gross receipts for the Year	\$ _____	\$ _____	\$ _____	\$ _____	21. Quarterly Payment due from line 14 \$ _____
15. Multiply total gross by the tax rate for your category	.0005 up to \$5,000,000 in excess of \$5,000,000 rate is .000125	.00075 up to \$3,300,000 in excess of \$3,300,000 rate is .000125	.0010 up to \$3,300,000 in excess of 3,300,000 rate is .0005		22. Penalty of 10% if paid after due date \$ _____
16. Total annual estimated tax due for the Year	\$ _____	\$ _____	\$ _____	\$ _____	23. Interest of _____% per month if paid after due date \$ _____
15. For quarterly tax due, divide the amount of item 13 by "4"					24. Total amount due this quarter/City of Harrisburg (Add lines 15, 16 & 17) \$ _____
Total amount \$ _____ /4=\$ _____ Quarterly Tax Due					25. Note: Use this area for Quarterly adjustments & final 4 <sup>th</sup> Quarter adjustments \$ _____
If Filing An Estimated Return Use Figures From Line 4 For 2 <sup>nd</sup> , 3 <sup>rd</sup> & 4 <sup>th</sup> Quarter Filings					26. Total amount due this Quarter (Add lines 18 & 19) \$ _____

If adjustments are necessary to your payment enter here and explain below.  
Reconcile estimated to actual. Adjustments:  
\$ \_\_\_\_\_

Wholesale \_\_\_\_\_

Retail \_\_\_\_\_

Bus. Privilege \_\_\_\_\_

Submit final breakdown of receipts when complete.

**Grand Total...Amount Due With This Return  
Make Check Payable To: "City Treasurer" (Add Lines 10 & 20)**

I declare under the penalties of perjury that this return has been examined by me and to the best of my knowledge and belief is a true, correct and complete return.

Signature of Taxpayer

Date

Title (Owner, Partner, Etc.)

Signature of preparer if other than Taxpayer

**CITY OF HARRISBURG & HARRISBURG SCHOOL DISTRICT  
QUARTERLY BUSINESS PRIVILEGE AND MERCANTILE  
3<sup>rd</sup> QUARTER FOR YEAR \_\_\_\_\_**

ACCOUNT #: \_\_\_\_\_

FEDERAL ID #: \_\_\_\_\_

TAXING CATEGORY: \_\_\_\_\_

MAIL TO: City of Harrisburg  
10 N. 2<sup>nd</sup> Street, Suite 305-A  
Harrisburg, PA 17101-1680

Phone: (717) 255-6513

Fax: (717) 255-6509

**SECTION A:**

**CITY OF HARRISBURG BUSINESS PRIVILEGE/MERCANTILE TAX**

<u>ITEM</u>	<u>WHOLESALE</u>	<u>RETAIL</u>	<u>BUSINESS PRIVILEGE</u>	<u>TOTAL AMOUNT</u>	
9. Indicate estimated or actual gross receipts for the year.	\$ _____	\$ _____	\$ _____	\$ _____	9. Quarterly Payment due from line 4 \$ _____
10. Multiply total gross by the tax rate for your category.	.0005 up to \$5,000,000 in excess of \$5,000,000 rate is .000125	.00075 up to \$3,300,000 in excess of \$3,300,000 rate is .000125	.0020 up to \$3,300,000 in excess of 3,300,000 rate is .0005		10. Penalty of 10% if paid after due date \$ _____
11. Total annual estimated tax due for the year.	\$ _____	\$ _____	\$ _____	\$ _____	7. Interest of _____% per month if paid after due date \$ _____
12. For quarterly tax due, divide the total amount of item 3 by "4"  Total amount \$ _____ /4=\$ _____ Quarterly Tax Due  <b>If Filing An Estimated Return Use Figures From Line 4 For 2<sup>nd</sup>, 3<sup>rd</sup> &amp; 4<sup>th</sup> Quarter Filings</b>					8. Total amount due this quarter/City of Harrisburg. (add lines 5, 6 & 7) \$ _____
					13. Note: Use this are for Quarterly adjustments & final 4 <sup>th</sup> Quarter adjustments \$ (-) _____ \$ (+) _____
					14. Total amount due this Quarter (Add lines 8 & 9) \$ _____

**SECTION B:**

**SCHOOL DISTRICT OF HARRISBURG BUSINESS PRIVILEGE/MERCANTILE TAX**

<u>ITEM</u>	<u>WHOLESALE</u>	<u>RETAIL</u>	<u>BUSINESS PRIVILEGE</u>	<u>TOTAL AMOUNT</u>	
17. Indicate estimated or actual gross receipts for the Year	\$ _____	\$ _____	\$ _____	\$ _____	27. Quarterly Payment due from line 14 \$ _____
18. Multiply total gross by the tax rate for your category	.0005 up to \$5,000,000 in excess of \$5,000,000 rate is .000125	.00075 up to \$3,300,000 in excess of \$3,300,000 rate is .000125	.0010 up to \$3,300,000 in excess of 3,300,000 rate is .0005		28. Penalty of 10% if paid after due date \$ _____
19. Total annual estimated tax due for the Year	\$ _____	\$ _____	\$ _____	\$ _____	29. Interest of _____% per month if paid after due date \$ _____
16. For quarterly tax due, divide the amount of item 13 by "4"  Total amount \$ _____ /4=\$ _____ Quarterly Tax Due  <b>If Filing An Estimated Return Use Figures From Line 4 For 2<sup>nd</sup>, 3<sup>rd</sup> &amp; 4<sup>th</sup> Quarter Filings</b>					30. Total amount due this quarter/City of Harrisburg (Add lines 15, 16 & 17) \$ _____
					31. Note: Use this area for Quarterly adjustments & final 4 <sup>th</sup> Quarter adjustments \$ _____
					32. Total amount due this Quarter (Add lines 18 & 19) \$ _____

If adjustments are necessary to your payment enter here and explain below.  
Reconcile estimated to actual. Adjustments:  
\$ \_\_\_\_\_

Wholesale \_\_\_\_\_

Retail \_\_\_\_\_

Bus. Privilege \_\_\_\_\_

Submit final breakdown of receipts when complete.

**Grand Total...Amount Due With This Return  
Make Check Payable To: "City Treasurer" (Add Lines 10 & 20)**

I declare under the penalties of perjury that this return has been examined by me and to the best of my knowledge and belief is a true, correct and complete return.

Signature of Taxpayer

Title (Owner, Partner, Etc.)

Date

Signature of preparer if other than Taxpayer

**CITY OF HARRISBURG & HARRISBURG SCHOOL DISTRICT  
QUARTERLY BUSINESS PRIVILEGE AND MERCANTILE  
4<sup>th</sup> QUARTER FOR YEAR \_\_\_\_\_**

**ACCOUNT #:** \_\_\_\_\_

**FEDERAL ID #:** \_\_\_\_\_

**TAXING CATEGORY:** \_\_\_\_\_

**MAIL TO:** City of Harrisburg  
10 N. 2<sup>nd</sup> Street, Suite 305-A  
Harrisburg, PA 17101-1680

**Phone:** (717) 255-6513      **Fax:** (717) 255-6509

**SECTION A:**

**CITY OF HARRISBURG BUSINESS PRIVILEGE/MERCANTILE TAX**

<u>ITEM</u>	<u>WHOLESALE</u>	<u>RETAIL</u>	<u>BUSINESS PRIVILEGE</u>	<u>TOTAL AMOUNT</u>	
13. Indicate estimated or actual gross receipts for the year.	\$ _____	\$ _____	\$ _____	\$ _____	11. Quarterly Payment due from line 4 \$ _____
14. Multiply total gross by the tax rate for your category.	.0005 up to \$5,000,000 in excess of \$5,000,000 rate is .000125	.00075 up to \$3,300,000 in excess of \$3,300,000 rate is .000125	.0020 up to \$3,300,000 in excess of 3,300,000 rate is .0005		12. Penalty of 10% if paid after due date \$ _____
15. Total annual estimated tax due for the year.	\$ _____	\$ _____	\$ _____	\$ _____	7. Interest of _____% per month if paid after due date \$ _____
					8. Total amount due this quarter/City of Harrisburg. (add lines 5, 6 & 7) \$ _____
16. For quarterly tax due, divide the total amount of item 3 by "4"					15. Note: Use this are for Quarterly adjustments & final 4th Quarter adjustments \$ (-) \$ (+) _____
Total amount \$ _____ /4=\$ _____ Quarterly Tax Due					16. Total amount due this Quarter (Add lines 8 & 9) \$ _____
<b>If Filing An Estimated Return Use Figures From Line 4 For 2<sup>nd</sup>, 3<sup>rd</sup> &amp; 4<sup>th</sup> Quarter Filings</b>					

**SECTION B:**

**SCHOOL DISTRICT OF HARRISBURG BUSINESS PRIVILEGE/MERCANTILE TAX**

<u>ITEM</u>	<u>WHOLESALE</u>	<u>RETAIL</u>	<u>BUSINESS PRIVILEGE</u>	<u>TOTAL AMOUNT</u>	
20. Indicate estimated or actual gross receipts for the Year	\$ _____	\$ _____	\$ _____	\$ _____	33. Quarterly Payment due from line 14 \$ _____
21. Multiply total gross by the tax rate for your category	.0005 up to \$5,000,000 in excess of \$5,000,000 rate is .000125	.00075 up to \$3,300,000 in excess of \$3,300,000 rate is .000125	.0010 up to \$3,300,000 in excess of 3,300,000 rate is .0005		34. Penalty of 10% if paid after due date \$ _____
22. Total annual estimated tax due for the Year	\$ _____	\$ _____	\$ _____	\$ _____	35. Interest of _____% per month if paid after due date \$ _____
					36. Total amount due this quarter/City of Harrisburg (Add lines 15, 16 & 17) \$ _____
17. For quarterly tax due, divide the amount of item 13 by "4"					37. Note: Use this area for Quarterly adjustments & final 4 <sup>th</sup> Quarter adjustments \$ _____
Total amount \$ _____ /4=\$ _____ Quarterly Tax Due					38. Total amount due this Quarter (Add lines 18 & 19) \$ _____
<b>If Filing An Estimated Return Use Figures From Line 4 For 2<sup>nd</sup>, 3<sup>rd</sup> &amp; 4<sup>th</sup> Quarter Filings</b>					

If adjustments are necessary to your payment enter here and explain below.  
Reconcile estimated to actual. Adjustments:

\$ \_\_\_\_\_

Wholesale \_\_\_\_\_

Retail \_\_\_\_\_

Bus. Privilege \_\_\_\_\_

Submit final breakdown of receipts when complete.

**Grand Total...Amount Due With This Return**

**Make Check Payable To: "City Treasurer" (Add Lines 10 & 20)**

\$ \_\_\_\_\_

I declare under the penalties of perjury that this return has been examined by me and to the best of my knowledge and belief is a true, correct and complete return.

Signature of Taxpayer

Title (Owner, Partner, Etc.)

Date

Signature of preparer if other than Taxpayer

4th Quarter Payment / Remit Prior to Jan. 30<sup>th</sup>

**PLEASE ATTACH A COPY OF YOUR FEDERAL SCHEDULE C, 1065 OR 1120 FOR M FOR THE YEAR**